Under the federal No Surprises Act, as an uninsured or self-pay patient, you have the right to receive a “Good Faith Estimate” explaining how much your medical care will cost.

Under the law, health care providers need to give patients who don’t have insurance or who are not using insurance an estimate of the bill for medical items and services.

You have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency items or services. This includes related costs, like medical tests, prescription drugs, equipment, and hospital fees.

Be sure your health care provider gives you a Good Faith Estimate in writing:

- **When your medical service or item is scheduled at least 3 business days in advance:** No later than 1 business day after the date of scheduling.
- **When your medical service or item is scheduled at least 10 business days in advance:** No later than 3 business days after the date of scheduling.

You can also ask your health care provider, and any other provider you choose, for a Good Faith Estimate before you schedule an item or service, and they must provide it no later than 3 business days after your request.

If you receive a bill that is at least $400 more than your Good Faith Estimate, you can dispute the bill.

Be sure to save a copy or photo of our Good Faith Estimate.

If you would like to request an uninsured or self-pay estimate, please contact our Financial Counselors at DFCIAccessFIO@partners.org or 617-582-9820.

For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises or call 800-985-3059.